

GYNÆCOLOGICAL EXAMINATIONS IN ASYLUMS.—Dr. Whitwell, in a recent discussion at the San Francisco Obstetrical Society (San Francisco *Western Lancet*, March, 1883), stated that when he was assistant physician in the New York State Lunatic Asylum there were three hundred female patients, but he did not know of a single examination having been made to determine the existence of uterine or ovarian disease. He believed that uterine disease was sometimes the cause of insanity.

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PSYCHICAL SYMPTOMS FROM CRANIAL DEPRESSION.—Dr. Guermontprez (*Archives Générales de Médecine*, August, 1882) comes to the following conclusions respecting the influence of depression of the cranium in childhood: First, depression of the cranium, whether complicated or not, may in a general way be the cause of various psychical disturbances. Second, such disturbances are more marked when the depression is on the left frontal region. Third, such depressions may interfere with the normal psychical development and with the cerebral growth. The second conclusion is based on *a priori* ideas rather than on experience.

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AMANITA MUSCARIA IN NEGATIVE LYPEMANIA.—Dr. Carle Bareggi (*Archivio per le Malattie Nervose*, F. iv, 1882, p. 219) has been experimenting with this fungus in the treatment of forms of insanity attended by negative depression. His results were not at all decisive of any thing. The drug appeared to be allied to belladonna in some respects, and from his description might be of value in mania, but was decidedly not indicated in the conditions in which he gave it.

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CYCLOTHYMIA, OR CIRCULAR INSANITY.—Pick (*Neurologisches Centralblatt*, February 1, 1883) calls attention to the fact that Wigan ("Duality of the Mind," 1844, p. 287) was perhaps the first to clearly describe this form of insanity. Wigan mentions the case of a young man whose disease assumed the character of periodicity. There was a kind of cycle beginning with intense despondency passing on to composure, to cheerfulness, hilarity, boisterous gayety, violent and convulsive mirth, extravagant volubility and wit, gross and monstrous obscenity, and thence again into the most furious mania. This gradually subsided into melancholy, left him two or three weeks in tranquillity, and then went again its miserable round.

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ECCENTRICITY AND IDIOSYNCRASY.—Under this title Dr. W. A. Hammond (*New York Medical Journal*, October, 1882) discusses certain psychical manifestations which are the source of much forensic difficulty. He recognizes the difference between the two varieties of eccentricity, which Dr. Kempster so singularly confounded into one (Guiteau Trial, Official Report, p. 535).

Like Tuke ("Psychological Medicine"), Dr. Hammond regards the first as the result of an excess of individuality; the second being produced by weakened judgment. Under idiosyncrasies he places the antipathies which are sometimes found in healthy people. Some of the instances narrated belong, however, to a different category. Thus, the man who experienced alarming vertigo and dizziness when a precipice was described, was a person in whom the imagination was strongly developed, and who was, therefore, capable of active reproductions of the memory, producing the same phenomena usually observable on ascending a precipice. Between this intellectual phenomenon and the swoon of the people on seeing roses, etc., there is nothing in common. There is clearly traceable a process of intellection in the first case which does not exist in the others.

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CRIMINAL ATTEMPTS IN INSANE ASYLUMS.—Under this title Dr. Giraud (*Annales Médico-Psychologiques*, November, 1882) discusses several attempts made, from obviously insane motives, by inmates of insane hospitals and other lunatics.

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TROPHIC DISTURBANCES IN CONVALESCENCE FROM MANIA.—Dr. Sioli (*Neurologisches Centralblatt*, January 15, 1882) finds that, despite the best nutrition, the body loses weight during the excitement of mania. This he is disposed to attribute, not to the loss of sleep, incessant motion, etc., but to a trouble of nutrition of central origin.

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TEMPORARY INSANITY IN BRASS FOUNDERS.—According to Binswanger, seventy-five out of a hundred brass founders are subject to a fever arising from their occupation (*Neurologisches Centralblatt*, March 15, 1882). One young man was attacked by a raptus melancholicus, which completely disappeared in three days. Similar types of insanity have been found due to lead (*JOURNAL OF NERVOUS AND MENTAL DISEASE*, 1881), and Binswanger is of opinion that the type presented was that of the toxic psychoses.

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TRANSITORY INSANITY.—Loewenfeld (*Neurologisches Centralblatt*, June 15, 1882) attempts to determine a relation between the mania transitoria of English authors, the transitorisches töbsucht of Schwartzer, and migraine. In his opinion, the insanity is on many occasions simply a migraine-replacing psychosis.

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CLASSIFICATION OF INSANITY.—Dr. N. Folsom (*New York Medical Journal*, January 20, 1883) claims "that the impossibility of a perfectly satisfactory classification of mental diseases—that is, of one which admits of all cases being so grouped as to satisfy all authorities—is sufficiently demon-